



# NASW

National Association of Social Workers / Connecticut Chapter

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## TESTIMONY REGARDING HB-5037: AN ACT ADJUSTING THE STATE BUDGET FOR THE BIENNIUM ENDING JUNE 30, 2023

Appropriations Committee

February 23, 2022

Presented By: Kathleen Callahan, MSW

Dear Honorable Chairpersons Osten and Walker, Ranking Members Miner and France, Vice Chairs Hartley, Dathan, and Nolan, and all other distinguished Members of the Appropriations Committee of the Connecticut General Assembly:

My name is Kathleen Callahan, a resident of Stratford, and the chair of the National Association of Social Workers Connecticut Chapter's Education and Legislative Action Network (NASW/CT ELAN). I am testifying on behalf of the chapter which represents over 2,300 members regarding the Department of Social Services in the proposed human services budget, *HB-5037: An Act Adjusting the State Budget for the Biennium Ending June 30, 2023*.

NASW/CT believes that every Connecticut resident has the right to accessible, comprehensive health care. Our 2022 legislative agenda specifically promotes actions that advance Medicaid expansion within the state. Specifically, we continue to support expansion of adult eligibility to 200% of the federal poverty level, an increase in adult dental reimbursement rates, and coverage for all income-eligible immigrants regardless of status. We also call on the committee to establish Medicaid provider status to Licensed Master Social Worker's in established independent practices, boosting an overwhelmed workforce with available, trained workers.

### Eligibility to 200% of the Federal Poverty Level

We thank you all for your support last session on expansion of health care coverage to low-income adults, parents and related caretakers, children, and pregnant women. Working through into the special session in June resulted in the Covered Connecticut program that will provide fully subsidized coverage for eligible adults with income over the Medicaid limit and up to 175% of FPL.

It is not enough.

Health insurance remains unaffordable for some people in Connecticut. Even with Covered CT, some people will lose Medicaid eligibility as the minimum wage increases. While important and necessary, the minimum wage increase does not cover the cost of health insurance even with subsidies and cost-sharing on Access Health CT. And minimum wage is not living wage.

For adults between the current eligibility rate and the 200% rate the ability to afford health insurance is between extremely difficult to simply impossible. Those who are uninsured are most likely to be people with incomes of \$25,000-\$49,000, where costs of housing, food, clothing, transportation, etc. leaves no funds for health insurance coverage. It is well documented that this group struggles the most with finding health care insurance as there are no affordable health care insurance options for adults in this income range. Within this economic group are persons of color who are far more likely to go without insurance coverage. We also know that individuals without health insurance will put off needed preventative care and early detection of serious health conditions, and when they become ill and finally seek care it is at a stage of far greater needs at far greater cost. If they are parents, the ability to care for their children is diminished when dealing with their own health.

It is also well documented that when the parents lack health insurance their children are less likely to receive health care services **even when the children are enrolled in HUSKY**. Thus, the lack of coverage for adults was also in reality **an elimination of coverage for many children**.

The solution to this problem is simple and we have been progressing toward it: expand eligibility for all adults to 200% of the FPL.

#### Increase Adult Dental Reimbursement Rates

While we support the proposed 25% increase in adult dental reimbursement rates in the governor's proposed budget, we call for a larger increase that matches adult rates to the child reimbursement rates for all procedures, in addition to the already proposed endodontic reimbursement rate

The dental Medicaid rates have not been increased in 14 years and current adult rates are a fraction of pediatric dental rates, so low that dentists receive 37 cents on the dollar compared to average insurance. Those enrolled in HUSKY programs face difficulties finding a provider and securing appointments, resulting in two-thirds of adults not accessing dental care at all. We all know how painful dental issues can be and how it impacts daily life. According to public health dentists, in the case of a necessary root canal, the pain – complicated by barriers and delays – leads to 80% of adults getting an extraction instead of appropriate treatment.

Lack of coverage is a significant barrier to preventative care and early detection of serious health conditions. When help is finally sought the costs are far greater as the

problem is much exacerbated. It is well past time that we treat dental care on par with other medical treatments, especially since preventive dental care often is the means to discovering non-dental conditions that are beginning to take place. Such early detection is cost effective, saving Medicaid dollars from paying for more acute treatment down the road.

#### Full Coverage for Income-eligible Immigrants regardless of Status

Expanding HUSKY programs to cover all income-eligible immigrants who are pregnant, postpartum, or under the age of 8 in 2021 was a huge step forward.

It is not enough.

All children and adults need health insurance to learn, work, and thrive. All residents of our state deserve access to health care.

As mentioned above, lack of health insurance is one of the most significant barriers to health. Insurance coverage facilitates access to care, prevents long-term chronic illness, and leads to a reliance on emergency care for conditions that often could have been prevented or managed in a lower-cost setting.

We have people helping to fund our HUSKY programs through their state and local tax contributions who remain unable to benefit even if they meeting the income eligibility criteria. Health care is a human right and no person, regardless of immigration status, should be denied or forced to pay costly treatment when they are eligible for our HUSKY program.

#### Establish LMSW Provider Status

Providers should be allowed to work at their highest level of Scope of Practice. For social work this requires Medicaid giving provider status to Licensed Master Social Workers (LMSW) practicing within an established independent practice. The LMSW, which is the initial license level for social workers, is recognized by Medicaid in certain clinics and in established independent practices by some of the major private insurers, so why not expand Medicaid to LMSWs in established private practices?

LMSWs practice under the same Scope of Practice as Licensed Clinical Social Workers. The restriction on LMSWs is: they must be supervised by an independent practice level clinical level licensed behavioral health professional and shall only diagnose with consultation of an independent clinical licensed behavioral health professional.

There are many independent practices that are employing LMSWs, however they are not currently Medicaid eligible providers in such settings. Independent practitioners who accept Medicaid would be far more likely to employ a LMSW if Medicaid allowed

provider status. This would increase the availability of qualified clinical social workers to serve the Medicaid population.

With respect and gratitude for your service and consideration,

Kathleen Callahan  
NASW/CT ELAN Chair  
Stratford, CT